2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000092601

HB TRUCK & EQUIPMENT CORP.



Principal Place of Business

18051 BISCAYNE BLVD. NORTH TOWER APT. 1601 AVENTURA, FL 33160

Mailing Address

18051 BISCAYNE BLVD. NORTH TOWER APT. 1601 AVENTURA, FL 33160

FILED Apr 23, 2007 08:00 All Secretary of State



DO NOT WRITE IN THIS SPACE

03022007 No Cha-P CR2E034 (11/05)

4. FEI Number Applied For 55-0871999 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

ARAN, FERNANDO S ESQ. ARAN CORREA & GUARCH, P.A. 255 UNIVERSITY DRIVE CORAL GABLES, FL 33134

DO NOT WRITE IN THIS SPACE

			The state of the s	
8. The above the obligat	named entity submits this statement for the pions of registered agent.	ourpose of changing its registe	ered office or registered agent, or both	, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Registe	red Agent signature required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Fin Trust Fund Contribution		
10.	OFFICERS AND DIREC	CTORS		15 3 3 4 B 3 2 2 3 4 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MR BALIUS, HONORATO 18051 BISCAYNE BLVD., N. TOWER APT. 1601 AVENTURA, FL 33160		U00000726147	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				05/03/07-80051-010 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-SI-ZIP			IN T	HIS SPACE
TITLE NAME STREET ADDRESS	·			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report at the and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustel employment to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment w

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP